

FORM NO. 5 MARGIN RESERVED FOR BINDING.

WRITE PLAINLY, WITH UNFADING INK—THIS IS A PERMANENT RECORD.

N. B.—In case of TWINS OR TRIPLETS use a SEPARATE BLANK for each child, and mark the FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

McCaw, of Columbia.

(1) PLACE OF BIRTH

County of Sumter

Township of .....

OR  
Inc. Town of .....

City of Sumter  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

74854

Registration District No. 41A Registered No. 143  
(For use of Local Registrar)

(2) Full Name of Child Veguesha Dore Clayton If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL girl (4) Twin or Triplet? To be answered only in event of Twins or Triplets (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Aug. 20, 1916  
(Name of Month) (Day) (Year)

FATHER.

MOTHER.

(8) FULL NAME J. A. Clayton

(14) NAME BEFORE MARRIAGE Besser Chestnut

(9) PRESENT POSTOFFICE OF FATHER Sumter SC

(15) PRESENT POSTOFFICE OF MOTHER Sumter SC

(10) COLOR OR RACE White (11) AGE AT LAST BIRTHDAY 36  
(Years)

(16) COLOR OR RACE White (17) AGE AT LAST BIRTHDAY 22  
(Years)

(12) BIRTHPLACE Washington Co. N.C.

(18) BIRTHPLACE Horry Co. S.C.

(13) OCCUPATION Contractor

(19) OCCUPATION Domestic

(20) Number of children born to mother, including present birth 1

(21) Number of children of this mother now living, including present birth 1

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

(22) I hereby certify that I attended the birth of this child, who was Aug 20 at 11:30 A.M. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) W. E. Miller, M.D.

(24) State whether Physician or Midwife (25) Address of Physician or Midwife  
Physician | Sumter S.C.

Given name added from a supplemental report

(26) Witness (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Sept 6, 1916 (28) W. J. McKee Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.